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Virtual Board Saves Real Money

Filed under CORPSMAN HOSPITALS TRAINING

(NO COMMENTS)

By Capt. Elizabeth McGuigan, director, Navy Graduate Medical Education (GME) & Continuing Medical Education (CME) and Bill Robinson, deputy, Navy GME & CME



Lt. Lauren Mattingly, an intern in the Naval Medical Center San Diego Graduate Medical Education program, examines a newborn baby in the Neonatal Intensive Care Unit. The graduate program trains doctors in the development of clinical and professional skills. The hospital has 24 accredited programs such as obstetrics gynecology, internal medicine and orthopedics. More than 70 interns are enrolled in the 2011 Graduate Medical Education program. (U.S. Navy photo by Mass Communication Specialist Seaman Joseph A. Boomhower/Released)

This year's Joint Service Graduate Medical Education Selection Board (JSGMESB), which chooses medical officers from the Army, Air Force and Navy for internship, residency, fellowship and non-clinical training, had a very different look – it was completely virtual!

In 2012 the Navy Graduate Medical Education (GME) team put together a strategic plan for a virtual selection board in the event funding would not be approved for the JSGMESB. In early 2013, we were suddenly faced with sequestration and had to move forward with our virtual selection board plan.

There were some significant challenges that had to be overcome in order for this new idea to work and there was very little room for error. Additionally, the time frame for execution was only about five months, during which we had the furlough and other disruptions that could have slowed down a less committed team — but not ours.

Usually, an applicant's record has multiple documents, including test results, letters of

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recommendation and command endorsements, that each scorer has to review and then score against all the other applicants in that specialty. This year, all of these elements went digital, from electronic applications to online virtual scoring done remotely from every GME training site in the military. The Navy had 904 submissions out of a total of 2,223 applications which the virtual board viewed and ranked. Selection results were released through the JSGMESB database, Dec. 18, 2013. Applicants only needed to log into the database to get their results.

Already we have heard many compliments from our own specialty leaders and program directors as well as the Army and Air Force GME leadership noting that this year was by far the most integrated and 'joint' board they have ever participated in.

Even more impressive than the virtual board process itself, was the cost savings to the Services.

The JSGMESB historically has a total bill across the Department of Defense of approximately \$1.5 million dollars. That figure includes facility and travel expenses.

Using Navy's virtual selection board plan, we expect significant travel savings across the services. The final Navy travel cost for the 2013 board was reduced by \$80,000 from the previous year. The Army and Air Force should see comparable reductions in their final travel costs.

As hosts, the Navy GME team was phenomenal throughout the process, taking care of technical as well as personnel issues related to the JSGMESB for all three services. The impact was felt DOD-wide.

The GME Selection Board process has taken on a new look with virtual scoring but the mission remains the same — to train a tactically proficient combat ready medical force. As Navy Surgeon General Vice Adm. Matthew Nathan says, 'Graduate Medical Education is the life blood of Navy Medicine.'

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